

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp

CALIFORNIA
2001/02
FORM

460

Page 1 of 38

For Official Use Only

Statement covers period

from 07/01/2020

through 09/19/2020

Date of election if applicable:
(Month, Day, Year)

11/03/2020

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1,2,3, and 4.

☒ Officeholder, Candidate Controlled Committee

☒ State Candidate Election Committee

☐ Recall

(Also Complete Part 5.)

☐ General Purpose Committee

☐ Sponsored

☐ Small Contributor Committee

☐ Political Party/Central Committee

☐ Ballot Measure Committee

☐ Primary Formed

☐ Controlled

☐ Sponsored

(Also Complete Part 6.)

☐ Primary Formed Candidate/
Officeholder Committee
(Also Complete Part 7.)

2. Type of Statement:

☒ Pre-election Statement

☐ Semi-annual Statement

☐ Termination Statement

☒ Amendment (Explain below)

Update Summary Page, Sch. A, Sch. F & Sch. G

☐ Quarterly Statement

☐ Special Odd-Year Report

☐ Supplemental Preelection
Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
1414500

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
Rebecca Bauer-Kahan for Assembly 2020

STREET ADDRESS (NO P.O. BOX)

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|-------------------|-----------|--------------|----------------------|
| <u>Sacramento</u> | <u>CA</u> | <u>95815</u> | <u>(925)386-6725</u> |

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|---------------|-----------|--------------|-----------------|
| <u>Orinda</u> | <u>CA</u> | <u>94563</u> | |

OPTIONAL: FAX/E-MAIL ADDRESS

(916) 333-1344 / BauerKahan2020@deaneandcompany.com

Treasurer(s)

NAME OF TREASURER
Shawnda Deane

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|-------------------|-----------|--------------|-----------------------|
| <u>Sacramento</u> | <u>CA</u> | <u>95815</u> | <u>(916) 285-5733</u> |

NAME OF ASSISTANT TREASURER, IF ANY
Rebecca Bauer-Kahan

MAILING ADDRESS

| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|-------------------|-----------|--------------|-----------------------|
| <u>Sacramento</u> | <u>CA</u> | <u>95815</u> | <u>(916) 285-5733</u> |

OPTIONAL: FAX/E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 10/17/2020 By Shawnda Deane
DATE SIGNATURE OF TREASURER OR ASSISTANT TREASURER

Executed on 10/17/2020 By Rebecca Bauer-Kahan
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Executed on _____ By _____
DATE SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California

Recipient Committee
Campaign Statement
Cover Page – Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

Page 2 of 38

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Rebecca Bauer-Kahan

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Held: State Assembly Person

Assembly District

16

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

Orinda

CA

94563

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES

☐ NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O.BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Type or print in ink.
Amounts may be rounded
to whole dollars.

SUMMARY PAGE

| | | |
|--|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 3 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. NUMBER 1414500 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rebecca Bauer-Kahan for Assembly 2020

Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---------------------------------------|--------------------|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 | \$89,310.00 | \$213,448.40 |
| 2. Loans Received | Schedule B, Line 7 | \$0.00 | \$0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | \$89,310.00 | \$213,448.40 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | \$0.00 | \$0.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | \$89,310.00 | \$213,448.40 |

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

| | 1/1 through 6/30 | 7/1 to Date |
|---------------------------|------------------|-------------|
| 20. Contribution Received | \$0.00 | \$0.00 |
| 21. Expenditures Made | \$0.00 | \$0.00 |

Expenditures Made

| | | | |
|--|----------------------|-------------|--------------|
| 6. Payments Made | Schedule E, Line 4 | \$89,095.89 | \$278,823.57 |
| 7. Loans Made | Schedule H, Line 7 | \$0.00 | \$0.00 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | \$89,095.89 | \$278,823.57 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | \$2,362.88 | \$3,286.00 |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | \$0.00 | \$0.00 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | \$91,458.77 | \$282,109.57 |

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)

| Date of Election (mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| 11/3/2020 | \$41,708.74 |
| 3/3/2020 | \$232,879.32 |

Current Cash Statement

| | | | |
|---|---|--------------|--|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | \$520,851.01 | To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any). |
| 13. Cash Receipts | Column A, Line 3 above | \$89,310.00 | |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | \$233.34 | |
| 15. Cash Payments | Column A, Line 8 above | \$89,095.89 | |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | \$521,298.46 | |
| If this is a termination statement, Line 16 must be zero. | | | |

17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 \$0.00

Cash Equivalents and Outstanding Debts

| | | |
|-----------------------------|---------------------------------------|------------|
| 18. Cash Equivalents | See instructions on reverse | \$0.00 |
| 19. Outstanding Debts | Add Line 2 + Line 9 in Column B above | \$3,286.00 |

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A

| | | |
|--|--|--|
| Statement covers period from 07/01/2020 through 09/19/2020 | | CALIFORNIA FORM 460 Page 4 of 38 |
| I.D. Number 1414500 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 8/12/2020 | Doug Abbey San Francisco, CA 94115 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Doug Abbey Real Estate Agent | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/12/2020 | Nancy Abbey San Francisco, CA 94115 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Not Employed | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/27/2020 | Alticor, Inc. Ada, MI 49355 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$750.00 | \$750.00 | 2020G: \$750.00 |
| SUBTOTAL | | | | | | |

Schedule A Summary

| | |
|---|--------------------------|
| 1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.) | \$88,379.00 |
| 2. Amount received this period - unitemized contributions of less than \$100 | \$931.00 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) | TOTAL \$89,310.00 |

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

FPPC Form 460 (JUNE/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|--|
| Statement covers period from 07/01/2020 through 09/19/2020 | | CALIFORNIA FORM 460 Page 5 of 38 |
| I.D. Number 1414500 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rebecca Bauer-Kahan for Assembly 2020

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|--|
| 8/18/2020 | Amazon.com Services, LLC Seattle, WA 98109 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$4,700.00 | \$4,700.00 | 2020P: \$2,000.00 2020G: \$4,700.00 |
| 8/25/2020 | Arnold & Porter Kaye Scholer, LLP Partners Federal PAC Washington, DC 20001 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$2,000.00 | \$2,000.00 | 2020G: \$2,000.00 |
| 7/22/2020 | AT&T, Inc. and its Affiliates Sacramento, CA 95814 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,300.00 | \$1,300.00 | 2020P: \$2,300.00 2020G: \$1,300.00 |
| 8/19/2020 | Tyler Berding Walnut Creek, CA 94596 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Berding & Weil, LLP Attorney | \$500.00 | \$500.00 | 2020P: \$1,250.00 2020G: \$500.00 |
| 8/21/2020 | Shiva Berman Lafayette, CA 94549 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$100.00 | \$100.00 | 2020P: \$450.00 2020G: \$100.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|--|
| Statement covers period from 07/01/2020 through 09/19/2020 | | CALIFORNIA FORM 460 Page 6 of 38 |
| I.D. Number 1414500 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|--|
| 9/4/2020 | California Association of Psychiatric Technicians, Inc. Political Action Fund Small Contributor Committee Sacramento, CA 95811 Committee ID: 882070 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2020P: \$3,800.00 2020G: \$1,000.00 |
| 8/3/2020 | California Hotel & Lodging Association PAC Sacramento, CA 95816 Committee ID: 760808 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,500.00 | \$2,800.00 | 2020P: \$2,600.00 2020G: \$1,500.00 |
| 8/4/2020 | California Real Estate PAC (CREPAC) - California Association of Realtors Small Contributor Committee Los Angeles, CA 90071 Committee ID: 890106 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$1,000.00 | \$9,300.00 | 2020P: \$8,300.00 2020G: \$8,300.00 |
| 9/8/2020 | California Real Estate PAC (CREPAC) - California Association of Realtors Small Contributor Committee Los Angeles, CA 90071 Committee ID: 890106 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$7,300.00 | \$9,300.00 | 2020P: \$8,300.00 2020G: \$8,300.00 |
| 9/12/2020 | California Teachers Association/Association For Better Citizenship Small Contributor Committee Burlingame, CA 94010 Committee ID: 741941 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$9,300.00 | \$9,300.00 | 2020P: \$9,300.00 2020G: \$9,300.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 7 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. Number 1414500 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|--|---|--|-----------------------------|---|--|
| 9/14/2020 | Californians Allied for Patient Protection PAC Sacramento, CA 95814 Committee ID: 920780 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$2,000.00 | 2020P: \$2,000.00 2020G: \$1,000.00 |
| 8/30/2020 | Jacqueline Carson Lafayette, CA 94549 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$1,000.00 | \$1,000.00 | 2020P: \$200.00 2020G: \$1,000.00 |
| 7/16/2020 | Charter Communications, Inc. St. Louis, MO 63131 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$2,000.00 | \$2,000.00 | 2020P: \$2,000.00 2020G: \$2,000.00 |
| 8/3/2020 | Comerica, Inc. Federal PAC Auburn Hills, MI 48326 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| 8/12/2020 | Simone Coxe Palo Alto, CA 94304 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |

SUBTOTAL

*Contributor Codes
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|----------------------------|
| Statement covers period from <u>07/01/2020</u> | | CALIFORNIA FORM 460 |
| through <u>09/19/2020</u> | | |
| | | Page <u>8</u> of <u>38</u> |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. Number 1414500 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/12/2020 | Tench Coxe Palo Alto, CA 94304 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Sutter Hill Ventures Managing Partner | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 9/19/2020 | Jeffrey Crowe Atherton, CA 94027 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Norwest Venture Partners Managing Partner | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| SUBTOTAL | | | | | | |

*Contributor Codes
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 (other than PTY or SCC)
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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 9 of 38 |

SEE INSTRUCTIONS ON REVERSE

| | |
|--|------------------------|
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | I.D. Number 1414500 |
|--|------------------------|

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|--|
| 8/3/2020 | Doctors Company PAC, The AKA DOCPAC Napa, CA 94558 Committee ID: 923140 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,500.00 | \$1,500.00 | 2020P: \$3,000.00 2020G: \$1,500.00 |
| 8/20/2020 | Jennie Dorman Albany, CA 94706 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Jennie Dorman Teacher | \$108.00 | \$108.00 | 2020G: \$108.00 |
| 8/21/2020 | DRIVE Federal Committee Washington, DC 20001 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,000.00 | \$4,650.00 | 2020P: \$4,400.00 2020G: \$1,000.00 |
| 8/19/2020 | Tandra Ericson Orinda, CA 94563 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Orinda Union School District Teacher | \$250.00 | \$350.00 | 2020P: \$100.00 2020G: \$250.00 |
| 8/11/2020 | Foster Poultry Farms Livingston, CA 95334 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,500.00 | \$1,500.00 | 2020G: \$1,500.00 |
| SUBTOTAL | | | | | | |

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 10 of 38 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rebecca Bauer-Kahan for Assembly 2020

I.D. Number

1414500

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---|---|--|-----------------------------|---|------------------------------------|
| 7/16/2020 | Darlene Gee Orinda, CA 94563 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Howard Needles Tammen and Bergendoff Corporation (HNTB) Civil Engineer | \$250.00 | \$250.00 | 2020G: \$250.00 |
| 9/19/2020 | Charles Giancarlo Atherton, CA 94027 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Pure Storage, Inc. Chief Executive Officer | \$200.00 | \$200.00 | 2020G: \$200.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 7/4/2020 | Luz Gomez San Ramon, CA 94583 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Contra Costa County Public Health Healthy Communities Manager | \$100.00 | \$100.00 | 2020P: \$25.00 2020G: \$100.00 |
| 9/7/2020 | Vicki Gordon Martinez, CA 94553 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Contra Costa Community College District Board Member | \$100.00 | \$100.00 | 2020G: \$100.00 |

SUBTOTAL

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|-----------------------------|
| Statement covers period from <u>07/01/2020</u> | | CALIFORNIA FORM 460 |
| through <u>09/19/2020</u> | | |
| | | Page <u>11</u> of <u>38</u> |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. Number 1414500 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|--|---|--|-----------------------------|---|--|
| 8/19/2020 | Bert Gunter Pleasant Hill, CA 94523 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$250.00 | \$1,250.00 | 2020P: \$500.00 2020G: \$1,250.00 |
| 9/13/2020 | Bert Gunter Pleasant Hill, CA 94523 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$1,000.00 | \$1,250.00 | 2020P: \$500.00 2020G: \$1,250.00 |
| 8/20/2020 | David Hershenson San Francisco, CA 94131 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Tray.io Chief of Staff | \$100.00 | \$100.00 | 2020P: \$500.00 2020G: \$100.00 |
| 9/15/2020 | Timothy Ho Chicago, IL 60607 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Beyond Finance Executive | \$1,500.00 | \$1,500.00 | 2020G: \$1,500.00 |
| 8/27/2020 | International Brotherhood of Electrical Workers (IBEW) Local Union 302 Small Contributor Committee Martinez, CA 94533 Committee ID: 840975 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$4,700.00 | \$9,300.00 | 2020P: \$9,300.00 2020G: \$4,700.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|---|
| Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u> | | CALIFORNIA FORM 460 Page <u>12</u> of <u>38</u> |
| I.D. Number 1414500 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rebecca Bauer-Kahan for Assembly 2020

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| 9/4/2020 | Johnson & Johnson Corporate Political Fund Federal Washington, DC 20005 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$2,500.00 | \$2,500.00 | 2020G: \$2,500.00 |
| 8/21/2020 | Heather Kelly Berkeley, CA 94707 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Vir Biotechnology Director, Research PM | \$100.00 | \$100.00 | 2020G: \$100.00 |
| 9/19/2020 | Richard Kovacevich San Francisco, CA 94104 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/12/2020 | Laura Lauder Atherton, CA 94027 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Lauder Partners, LLC Venture Capitalist | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|-----------------------------|
| Statement covers period from <u>07/01/2020</u> | | CALIFORNIA FORM 460 |
| through <u>09/19/2020</u> | | |
| | | Page <u>13</u> of <u>38</u> |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. Number 1414500 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 9/19/2020 | Harold Messmer Menlo Park, CA 94025 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Robert Half International Chairman | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 7/3/2020 | Microsoft Corporation Federal PAC Redmond, WA 98052 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$2,500.00 | \$2,500.00 | 2020G: \$2,500.00 |
| 8/31/2020 | National Union of Healthcare Workers Candidate Committee for Quality Patient Care and Union Democracy Sacramento, CA 95815 Committee ID: 1318200 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$3,000.00 | \$3,000.00 | 2020G: \$3,000.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

| | | |
|--|--|---|
| Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u> | | CALIFORNIA FORM 460 Page <u>14</u> of <u>38</u> I.D. Number 1414500 |
| | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|--|---|--|-----------------------------|---|------------------------------------|
| 8/27/2020 | National Women's Political Caucus of California PAC Small Contributor Committee Riverside, CA 92506 Committee ID: 746373 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$250.00 | \$0.00 | 2020G: \$0.00 |
| 9/16/2020 | National Women's Political Caucus of California PAC Small Contributor Committee Riverside, CA 92506 Committee ID: 746373 Memo Reference: INC782 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | (\$250.00) | \$0.00 | 2020G: \$0.00 |
| 8/12/2020 | John Pasquesi Woodside, CA 94062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | John Pasquesi Investor | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/12/2020 | Meredith Pasquesi Woodside, CA 94062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Homemaker | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|--|----------------------------|
| Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u> | | CALIFORNIA FORM 460 |
| Page <u>15</u> of <u>38</u> | | |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. Number 1414500 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|--|
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/20/2020 | Kevin Pereau Lafayette, CA 94549 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | TranscendIT Health Healthcare | \$1,000.00 | \$3,500.00 | 2020P: \$4,000.00 2020G: \$3,500.00 |
| 8/12/2020 | Nicholas Pritzker San Francisco, CA 94129 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | TAO Capital Management, LP Chairman | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/12/2020 | Susan Pritzker San Francisco, CA 94129 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Homemaker | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 16 of 38 |

SEE INSTRUCTIONS ON REVERSE

| | |
|--|------------------------|
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | I.D. Number 1414500 |
|--|------------------------|

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|---|---|--|-----------------------------|---|------------------------------------|
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/19/2020 | David Ratner Walnut Creek, CA 94595 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | David Ratner Law Firm, LLP Attorney | \$500.00 | \$500.00 | 2020P: \$500.00 2020G: \$500.00 |
| 7/24/2020 | Alex Rogin Orinda, CA 94563 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$100.00 | \$150.00 | 2020P: \$100.00 2020G: \$150.00 |
| 8/20/2020 | Alex Rogin Orinda, CA 94563 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$50.00 | \$150.00 | 2020P: \$100.00 2020G: \$150.00 |
| 9/7/2020 | Michael Rusk Walnut Creek, CA 94596 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$100.00 | \$100.00 | 2020P: \$50.00 2020G: \$100.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 17 of 38 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rebecca Bauer-Kahan for Assembly 2020

I.D. Number
1414500

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------|--|---|--|-----------------------------|---|--|
| | ***INTERMEDIARY*** ActBlue Somerville, MA 02144 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 9/19/2020 | Tom Sadler Woodside, CA 94062 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | n/a Retired | \$1,000.00 | \$1,000.00 | 2020G: \$1,000.00 |
| | ***INTERMEDIARY*** Govern for California Network Committee San Rafael, CA 94901 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | |
| 8/11/2020 | Salesforce.com, Inc. San Francisco, CA 94105 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$1,500.00 | \$1,500.00 | 2020G: \$1,500.00 |
| 7/16/2020 | Service Employees International Union Local 1021 Candidate PAC Small Contributor Committee Sacramento, CA 95814 Committee ID: 1296948 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$1,021.00 | \$1,021.00 | 2020P: \$7,500.00 2020G: \$1,021.00 |
| SUBTOTAL | | | | | | |

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Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE A (CONT.)

| | | |
|--|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 18 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. Number 1414500 |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---|---|--|-----------------------------|---|--|
| 8/19/2020 | Joe Spector Orinda, CA 94563 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Hims Entrepreneur | \$250.00 | \$250.00 | 2020G: \$250.00 |
| 8/19/2020 | Samantha Spector Orinda, CA 94563 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Saloon Box Owner | \$250.00 | \$250.00 | 2020G: \$250.00 |
| 8/3/2020 | State Building and Construction Trades Council Of California PAC Small Contributor Committee Sacramento, CA 95814 Committee ID: 743501 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC | | \$7,800.00 | \$7,800.00 | 2020P: \$9,300.00 2020G: \$9,300.00 |
| 8/24/2020 | Walmart, Inc. Bentonville, AR 72716 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$4,700.00 | \$4,700.00 | 2020P: \$4,700.00 2020G: \$4,700.00 |
| 9/14/2020 | Yocha Dehe Wintun Nation Brooks, CA 95606 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | \$3,000.00 | \$3,000.00 | 2020P: \$2,000.00 2020G: \$3,000.00 |

SUBTOTAL \$88,379.00

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SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 1

Statement covers period
from 07/01/2020
through 09/19/2020

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

| FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT RECEIVED THIS PERIOD | (c) AMOUNT PAID OR FORGIVEN THIS PERIOD* | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST PAID THIS PERIOD | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE CONTRIBUTIONS TO DATE |
|--|---|---|--|--|---|--|--------------------------------------|---|
| <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | _____% RATE | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | _____% RATE | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | _____% RATE | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |

SUBTOTALS

Schedule B Summary

1. Loans received this period. _____
(Total Column (b) plus unitemized loans less than \$100.)

2. Loans paid or forgiven this period _____
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) _____ **Net** _____
Enter the net here and on the Summary Page, Column A, Line 2. (may be a negative number)

(Enter (e) on
Schedule E, Line 3)

* Amounts forgiven or paid by
another party also must be
reported on Schedule A.

** If required.

*Contributor Codes

IND-Individual COM-Recipient Committee (other than PTY or SCC) OTH-Other PTY-Political Party SCC-Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule B - Part 2

Loan Guarantors

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE B - PART 2

| | |
|--|-----------------------------|
| Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u> | CALIFORNIA FORM 460 |
| | Page <u>20</u> of <u>38</u> |
| I.D. Number 1414500 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

| FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | LOAN | AMOUNT GUARANTEED THIS PERIOD | CUMULATIVE TO DATE | BALANCE OUTSTANDING TO DATE |
|--|--|---|----------------------------------|-------------------------------------|--|-----------------------------------|
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | LENDER _____ DATE _____ | | CALENDAR YEAR _____ PER ELECTION (IF REQUIRED) _____ | |
| SUBTOTAL | | | | | Enter on Summary Page, Line 17 only. | |

Schedule C Nonmonetary Contributions Received

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE C

| | |
|--|----------------------------|
| Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u> | CALIFORNIA FORM 460 |
| Page <u>21</u> of <u>38</u> | I.D. Number 1414500 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | DESCRIPTION OF GOODS OR SERVICES | AMOUNT/ FAIR MARKET VALUE | CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31) | PER ELECTION TO DATE (IF REQUIRED) |
|---------------|---|--|---|----------------------------------|---------------------------|---|---------------------------------------|
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.).....
- Amount received this period - unitemized nonmonetary contributions of less than \$100
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL**

*Contributor Codes
 IND - Individual
 COM- Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule D

Summary of Expenditures

Supporting/Opposing Other Candidates, Measures and Committees

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE D

Statement covers period

from 07/01/2020

through 09/19/2020

CALIFORNIA
FORM **460**

Page 22 of 38

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER

1414500

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------|---|--|------------------------------|-----------------------|--|--|
| 9/15/2020 | California Democratic Party | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | \$38,800.00 | \$38,800.00 | |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 9/15/2020 | Payee Name: Dawn Addis for Assembly 2020 Candidate Name: Dawn Addis State Assembly Person District 35 Jurisdiction: Assembly District | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | \$4,700.00 | \$4,700.00 | 2020G: \$4,700.00 |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 9/15/2020 | Payee Name: Andrew Rodriguez for Assembly 2020 Candidate Name: Andrew Rodriguez State Assembly Person District 55 Jurisdiction: Assembly District | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | \$4,700.00 | \$4,700.00 | 2020G: \$4,700.00 |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |

SUBTOTAL

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$57,700.00
- Unitemized contributions and independent expenditures made this period of under \$100 \$50.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL** \$57,750.00

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule D
(Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

Type or print in ink.
 Amounts may be rounded
 to whole dollars.

SCHEDULE D (CONT.)

| | | |
|--|--|---|
| Statement covers period | | CALIFORNIA FORM 460 |
| from 07/01/2020 | | |
| through 09/19/2020 | | Page 23 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. NUMBER 1414500 |

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN.1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|-----------------------------|---|--|------------------------------|-----------------------|--|--|
| 9/15/2020 | Payee Name: Melissa Fox for Assembly 2020 Candidate Name: Melissa Fox State Assembly Person District 68 Jurisdiction: Assembly District | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | \$4,700.00 | \$4,700.00 | 2020G: \$4,700.00 |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 9/15/2020 | Payee Name: Diedre Thu-Ha Nguyen for Assembly 2020 Candidate Name: Diedre Thu-Ha Nguyen State Assembly Person District 72 Jurisdiction: Assembly District | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | \$4,700.00 | \$4,700.00 | 2020G: \$4,700.00 |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 8/10/2020 | Payee Name: Wilkins for Temecula City Council 2020 Candidate Name: Alisha Wilkins City Council Member District 2 Jurisdiction: Temecula | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | \$100.00 | \$100.00 | |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| | | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure | | | | |
| | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| SUBTOTAL \$57,700.00 | | | | | | |

Schedule E Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E

| | | |
|--|--|---|
| Statement covers period from 07/01/2020 through 09/19/2020 | | CALIFORNIA FORM 460 Page 24 of 38 |
| I.D. NUMBER 1414500 | | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers' salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging, and meals |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging, and meals |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|-------------------------|-------------|
| Brittany Youngman-Rein Walnut Creek, CA 94598 | | Administrative Services | \$1,000.00 |
| Deane & Company Sacramento, CA 95815 | PRO | | \$2,137.30 |
| Catherine E. Cutler Orinda, CA 94563 | MTG | Appetizers Only | \$473.12 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E Summary

| | |
|--|--------------------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) | \$89,091.14 |
| 2. Unitemized payments made this period of under \$100. | \$4.75 |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$0.00 |
| 4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$89,095.89 |

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|--|--|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from 07/01/2020 | | |
| through 09/19/2020 | | Page 25 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. NUMBER 1414500 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-------------------------|-------------|
| Card Services Center Kennesaw, GA 30144 | | | Credit Card Payment | \$450.00 |
| Card Services Center Kennesaw, GA 30144 | | | Credit Card Payment | \$201.85 |
| NGP Van, Inc. Washington, DC 20005 | OFC | | | \$50.00 |
| Brittany Youngman-Rein Walnut Creek, CA 94598 | | | Administrative Services | \$1,000.00 |
| Connie Sanders Emerson Sacramento, CA 95819 | FND | | | \$3,000.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

| | | |
|--|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through 09/19/2020 | | Page 26 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. NUMBER 1414500 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Deane & Company Sacramento, CA 95815 | PRO | | | \$2,319.74 |
| Alameda County Registrar of Voters Oakland, CA 94612 | FIL | | | \$4,167.00 |
| Contra Costa County Election Division Martinez, CA 94553 | FIL | | | \$3,196.00 |
| Paragon Payment Solutions Tempe, AZ 85282 | OFC | | | \$130.37 |
| Card Services Center Kennesaw, GA 30144 | | | Credit Card Payment | \$24.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|--|--|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from 07/01/2020 | | |
| through 09/19/2020 | | Page 27 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. NUMBER 1414500 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|-------------------------|-------------|
| Connie Sanders Emerson Sacramento, CA 95819 | FND | | | \$3,000.00 |
| Brittany Youngman-Rein Walnut Creek, CA 94598 | | | Administrative Services | \$1,000.00 |
| NGP Van, Inc. Washington, DC 20005 | OFC | | | \$750.00 |
| Deane & Company Sacramento, CA 95815 | PRO | | | \$2,327.71 |
| Paragon Payment Solutions Tempe, AZ 85282 | OFC | | | \$24.35 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|--|--|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from 07/01/2020 | | |
| through 09/19/2020 | | Page 28 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. NUMBER 1414500 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| The Pivot Group, Inc. Alexandria, VA 22305 | POS | | \$510.00 |
| The Pivot Group, Inc. Alexandria, VA 22305 | LIT | | \$4,790.00 |
| California Democratic Party Sacramento, CA 95811 | CTB | | \$38,800.00 |
| Committee ID: 741666 Dawn Addis for Assembly 2020 Sacramento, CA 95841 | CTB | | \$4,700.00 |
| Committee ID: 1422314 Andrew Rodriguez for Assembly 2020 Sacramento, CA 95815 | CTB | | \$4,700.00 |
| Committee ID: 1415241 | | | |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE E (CONT.)

| | | |
|--|--|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from 07/01/2020 | | |
| through 09/19/2020 | | Page 29 of 38 |
| NAME OF FILER Rebecca Bauer-Kahan for Assembly 2020 | | I.D. NUMBER 1414500 |

SEE INSTRUCTIONS ON REVERSE

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| Melissa Fox for Assembly 2020 Sacramento, CA 95815 | CTB | | | \$4,700.00 |
| Committee ID: 1414969 Diedre Thu-Ha Nguyen for Assembly 2020 Fullerton, CA 92835 | CTB | | | \$4,700.00 |
| Committee ID: 1421331 Card Services Center Kennesaw, GA 30144 | | | Credit Card Payment | \$674.00 |
| Paragon Payment Solutions Tempe, AZ 85282 | OFC | | | \$265.70 |
| | | | | |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$89,091.14

Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE F

Statement covers period
from 07/01/2020
through 09/19/2020

CALIFORNIA
FORM 460

Page 30 of 38

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

| NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Card Services Center Kennesaw, GA 30144 | Credit Card Payment | \$450.00 | \$0.00 | \$450.00 | \$0.00 |
| Catherine E. Cutler Orinda, CA 94563 | MTG Appetizers Only | \$473.12 | \$0.00 | \$473.12 | \$0.00 |
| Card Services Center Kennesaw, GA 30144 | Credit Card Payment | \$0.00 | \$286.00 | \$0.00 | \$286.00 |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTALS

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)..... **INCURRED TOTALS** \$3,286.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)..... **PAID TOTALS** \$923.12
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)..... **NET** \$2,362.88
May be a negative number.

Schedule F
(Continuation Sheet)
Accrued Expenses (Unpaid Bills)

Type or print in ink.
Amounts may be rounded
to whole dollars.

Statement covers period
from 07/01/2020
through 09/19/2020

CALIFORNIA FORM 460
Page 31 of 38
I.D. NUMBER 1414500

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

- CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FIL candidate filing/ballot fees

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings
- MBR member communications

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads
- RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals

TRS staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, email)

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Connie Sanders Emerson Sacramento, CA 95819 | FND | \$0.00 | \$3,000.00 | \$0.00 | \$3,000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| SUBTOTALS | | \$923.12 | \$3,286.00 | \$923.12 | \$3,286.00 |

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 07/01/2020
through 09/19/2020

CALIFORNIA
FORM **460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Card Services Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Amazon Seattle, WA 98109 | OFC | | | \$11.22 |
| Amazon Seattle, WA 98109 | OFC | | | \$21.84 |
| Amazon Seattle, WA 98109 | OFC | | | \$140.54 |
| Amazon Seattle, WA 98109 | OFC | | | \$4.25 |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$177.85

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 33 of 38 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Card Services Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
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| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
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| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| G Suite Mountain View, CA 94043 | OFC | | | \$24.00 |
| G Suite Mountain View, CA 94043 | OFC | | | \$24.00 |
| Wilkins for Temecula City Council 2020 Temecula, CA 92590 | CTB | | | \$100.00 |
| 1427503 G Suite Mountain View, CA 94043 | OFC | | | \$24.00 |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$172.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

| | | |
|-------------------------|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 07/01/2020 | |
| through | 09/19/2020 | Page 34 of 38 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Card Services Center

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
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| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Save Mount Diablo Walnut Creek, CA 94596 | CVC | | | \$500.00 |
| The Orinda Association Orinda, CA 94563 | CVC | | | \$286.00 |
| | | | | |
| | | | | |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$786.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE G

Statement covers period
from 07/01/2020
through 09/19/2020

CALIFORNIA
FORM **460**

Page 35 of 38

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

NAME OF AGENT OR INDEPENDENT CONTRACTOR
The Pivot Group, Inc.

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
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| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, email) |

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Mark Weiss Associates Bethesda, MD 20814 | LIT | | | \$3,925.00 |
| U.S. Postmaster Sacramento, CA 95813 | POS | | | \$510.00 |
| | | | | |
| | | | | |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$4435.00

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Schedule H – Loans Made to Others*

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE H

| | |
|--|----------------------------|
| Statement covers period from <u>07/01/2020</u> through <u>09/19/2020</u> | CALIFORNIA FORM 460 |
| | Page <u>36</u> of 38 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

| FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | (a) OUTSTANDING BALANCE BEGINNING THIS PERIOD | (b) AMOUNT LOANED THIS PERIOD | (c) REPAYMENT OR FORGIVENESS THIS PERIOD* | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD | (e) INTEREST RECEIVED | (f) ORIGINAL AMOUNT OF LOAN | (g) CUMULATIVE LOANS TO DATE |
|--|---|---|--|--|---|-----------------------------|--------------------------------------|---------------------------------------|
| | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | _____ % RATE | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| | | | | <input type="checkbox"/> PAID <input type="checkbox"/> FORGIVEN | | _____ % RATE | | CALENDAR YEAR PER ELECTION** |
| | | | | | DATE DUE | | DATE INCURRED | |
| *Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E. | | SUBTOTALS | | | | | | |

(Enter (e) on
Schedule I, Line 3)

Schedule H Summary

1. Loans made this period
(Total Column (b) plus unitemized loans less than \$100.)

2. Payments received on loans
(Total Column (c) plus unitemized payments less than \$100.)

3. Net change this period. (Subtract Line 2 from Line 1.) **NET**
(Enter the net here and on the Summary Page, Column A, Line 7.)

** If Required

Schedule I

Miscellaneous Increases to Cash

Type or print in ink.
Amounts may be rounded
to whole dollars.

SCHEDULE I

Statement covers period

from 07/01/2020

through 09/19/2020

CALIFORNIA FORM 460

Page 37 of 38

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Rebecca Bauer-Kahan for Assembly 2020

I.D. NUMBER
1414500

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH |
|---------------|---|------------------------|----------------------------|
| 7/31/2020 | First Foundation Bank Irvine, CA 92612 | Interest Earned | \$119.22 |
| 8/31/2020 | First Foundation Bank Irvine, CA 92612 | Interest Earned | \$114.12 |
| | | | |
| | | | |
| | | | |
| | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$233.34

Schedule I Summary

| | |
|--|-----------------------|
| 1. Increases to cash of \$100 or more this period..... | \$233.34 |
| 2. Unitemized increases to cash under \$100 this period. | \$0.00 |
| 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... | \$0.00 |
| 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)..... | TOTAL \$233.34 |

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

Memo Reference: INC782
Contribution Refunded